

PROJECT EVALUATION & FINANCIAL REPORT

Artists in Schools/Communities Grants

FOR NAC USE ONLY

ID# _____

Amount: _____

Staff _____

Accting Dept _____

Date: _____

BSG _____

SAA _____

NEA _____

OTH _____

This report is due 30 days after the end date listed on line 6 of your application.

This Project Evaluation & Financial Report (PEFR) is required of every grantee. It should tell us how your residency went, and how the money you were awarded was spent. Failure to submit this report will jeopardize receipt of your final payment & future applications.

- Use your original grant application to provide the basis for your Residency Report and Site Evaluation.
- Type your answers.
- Send the NAC the copy with original signatures, and make one copy for your files.
- Include newspaper clippings, photographs or other documentation if available.
- Call the NAC immediately if you have questions or concerns: 1-800-341-4067; 595-2122 (Omaha area residents).

1. Organization's Legal Name:

2. Address:

City/State/Zip:

3. Facility where project took place:

4. Additional sites used for residency activities:

5. Residency start date:

Residency end date:

Personnel Summary for this project	Number	Persons Benefiting from the Residency*	Number
6. Full time employees		9. Adults	
7. Part time employees		10. Children & youth	
8. Volunteers		11. Artists participating in the project	
		12. Teachers	
		TOTAL:	

*for more than 1 residency, this means the total for all residency activity

STATISTICS - The following information is for statistical purposes only.

13. Arts Education (check the appropriate statement)

- ☐ 50% or more of this project's activities are arts education directed to:
- ☐ K-12 students ☐ Pre-kindergarten ☐ Higher education students ☐ Adult learners
- ☐ Less than 50% of this project's activities are arts education directed to:
- ☐ K-12 students ☐ Pre-kindergarten ☐ Higher education students ☐ Adult learners
- ☐ None of this project involves arts education

14. Organizational Characteristics (check only one)

Select the category that represents at least 50% of the staff or board membership

- ☐ American Indian/Alaska Native ☐ Black, not Hispanic ☐ Asian/Pacific Islander ☐ Hispanic
- ☐ General - at least half of the staff or board or membership is not of one race.

15. Cultural Emphasis of the Project (check only one)

Select the category that indicates which culture or traditions were clearly emphasized

- ☐ American Indian/Alaska Native ☐ Black, not Hispanic ☐ Asian/Pacific Islander ☐ Hispanic
- ☐ General -- the project did not emphasize any one ethnicity.

16. Participant profile *Check all that apply*

- ☐ American Indian/ Alaska Native ☐ Black, not Hispanic ☐ Asian/Pacific Islander ☐ Hispanic ☐ White, not Hispanic

17. Artist profile *Check all that apply*

- ☐ American Indian/ Alaska Native ☐ Black, not Hispanic ☐ Asian/Pacific Islander ☐ Hispanic ☐ White, not Hispanic

18. Project Type (check which description is most appropriate for your project)

- ☐ Presenting/sponsoring event. *This grant supported the production of exhibitions, performances, readings, screenings, etc. that were created elsewhere and then offered to an audience or participants as part of your project.*
- ☐ Touring. *This project supported the movement of artworks and/or artists for performances, readings, screening, etc. to benefit audiences in different geographic areas.*
- ☐ None of this project involved presenting or touring.

- 19.** The money awarded for your project is possible thanks to an allocation from the State of Nebraska and/or the National Endowment for the Arts. Twice each year, the NAC compiles a report for members of the Nebraska Unicameral which lists grants awarded in each legislative district. This report summarizes successful projects which demonstrate the impact of the arts in our communities, schools and organizations. If you would like to provide a brief statement which describes the impact this grant had for your organization or community, please do so in the space below. Can we quote you? ☐ yes ☐ no Thanks!

COMPLETE THE RESIDENCY REPORT AND SITE EVALUATION, THEN READ & SIGN:

I do hereby certify that the figures submitted to the best of my knowledge, are true and accurate. I also certify that his program was in compliance with all guidelines and restrictions imposed by the Nebraska Arts Council, a state agency, and the National Endowment for the Arts, a federal agency. The project complied with Title VI of the 1964 Civil Rights Act; the Drug Free Workplace Act of 1988, Title IX of the Education Amendments of 1972 (if applicable) and Section 504 of the Rehabilitation Act of 1973. All information submitted in this application and the subsequent filing of the Performance Evaluation and Final Report are available for public inspection.

Signature of person completing this form

Date

Typed name

Address

City, State & Zip

Daytime phone (include area code)

Evening phone (include area code)

RESIDENCY REPORT**For Artists in Schools/Communities**

20.A. List the following information for each residency. Please attach additional pages if needed.

Name of site School and community	Name of artist & art discipline	Number of days	Contact Person	# of students participating*	# of students of color participating*	Artists Fees for this site	Amount of NAC award used for this site
<u>SAMPLE:</u> Neighborhood School, Anytown, Nebraska	Pablo Casals, Music	5	Jeanne Smith	87	9	\$1,000	\$500
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							

Add additional pages if necessary

*include audiences in this figure

20.B. Guest artists (for long- and extended-term residencies only)

Name: _____

Name: _____

Address: _____

Address: _____

City, State, Zip _____

City, State, Zip _____

Discipline: _____

Discipline: _____

Date(s): _____

Date(s): _____

Amount paid: \$ _____

Amount paid: \$ _____

**TOTAL
Artist Fees**

**TOTAL
NAC Award**

SITE EVALUATION**For Artists in Schools/Communities**

This section should be completed by the teacher or project coordinator who has had the most direct contact with the artist, preferably working side-by-side.

If the information is being provided for more than one residency, photocopy this page and answer questions **21 A.**, **B.**, **C.**, and **D.** For each residency. Attach additional sheets as needed for questions **21 B.** and **D.**

21. A.

Residency site:	
Evaluator:	
Artist:	
Arts discipline:	
Residency start date:	Residency end date:

21. B. In the space below, briefly describe the residency. List the goals and objectives. Were they achieved? Why or why not?

21. C. Rate each artist involved on the following areas. If more than one artist was involved in the residency, attach additional copies.

	outstanding	excellent	good	fair	poor
Artist came on time & was well-prepared for all scheduled events					
Artist's activities were suitable for classes involved					
Artist exhibited enthusiasm & ability to stimulate creativity in others					
Overall evaluation of residency					

21. D. Briefly describe the strengths and weaknesses of the artist in the above areas.